## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	PAGE 1 OF 4 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Freedom Partners Action Fund, Inc.	C C00564765
Check if 24-hour report 48-hour report New report A	mends report filed on
Full Name of Payee BIGEYE DIRECT	Date of Public Distribution/Dissemination
	02 / 02 / 7 7 7 7 7
Mailing Address 13860 REDSKIN DRIVE	Amount
City State Zip Code	13400.00
HERNDON VA 20171	Transaction ID : SE24.436 Date of Disbursement or Obligation
Purpose of Expenditure DIRECT MAIL EXPENSE  Category Type	// M M / D D / Y Y Y Y
Name of Federal Candidate	Support Office Sought: House District:
HILLARY RODHAM CLINTON	Oppose
Calendar Year-To-Date Per Election for Office Sought 36332.18	Disbursement For:  Primary
Full Name of Payee	Date of Public Distribution/Dissemination
BIGEYE DIŘECT	02 / Q2 / 2016
Mailing Address 13860 REDSKIN DRIVE	Amount
City State Zip Code HERNDON VA 20171	Transaction ID : SE24.462
Purpose of Expenditure  Category	Date of Disbursement or Obligation
Type	
Name of Federal Candidate	Support Office Sought: House District:
HILLARY RODHAM CLINTON	Oppose President Senate State:
Calendar Year-To-Date Per Election for Office Sought 36332.	Disbursement For: Primary General 2016 Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	16945.95
(b) SUBTOTAL of Unitemized Independent Expenditures	······································
(c) TOTAL Independent Expenditures	······································
Under penalty of perjury I certify that the independent expenditures reported h with, or at the request or suggestion of, any candidate or authorized committee party committee) any political party committee or its agent.	
Thomas F. Maxwell III [Electronically Filed]	Date 02 02 2016
Signature	

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48			
IAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼			
Freedom Partners Action Fund, Inc.				
	C C00564765			
check if 24-hour report X 48-hour report New report Amends report filed	on M = M / D = D / Y = Y = Y			
Full Manner of Davids				
Full Name of Payee CMDI	Date of Public Distribution/Dissemination			
Mailing Address 1593 SPRING HILL ROAD	02 02 2016			
STE. 400	Amount			
City State Zip Code	991.91			
TYSONS CORNER VA 22182	Transaction ID : SE24.440 Date of Disbursement or Obligation			
Purpose of Expenditure DIRECT MAIL EXPENSE  Category/ Type	01 28 2016			
Name of Federal Candidate Support Office	Sought: House District:			
HILLARY RODHAM CLINTON Oppose	President Senate State:			
Calendar Year-To-Date Per Election for Office Sought  Disbut 2016	rrsement For: Primary General			
Edi Name of Broom	Other (specify) -			
Full Name of Payee COLOR TREE GROUP	Date of Public Distribution/Dissemination			
Mailing Address 8000 VILLA PARK DRIVE	02 02 2016			
SOUN VILLA FARREDRIVE	Amount			
City State Zip Code	9383.38			
HENRICO VA 23228	Transaction ID : SE24.448 Date of Disbursement or Obligation			
Purpose of Expenditure DIRECT MAIL EXPENSE  Category/ Type	01 29 2016			
Name of Federal Candidate Support Office	e Sought: House District:			
HILLARY RODHAM CLINTON Oppose	President Senate State:			
2016	ursement For: Primary X General			
Per Election for Office Sought	Other (specify) -			
(a) SUBTOTAL of Itemized Independent Expenditures	10375.29			
(b) SUBTOTAL of Unitemized Independent Expenditures				
	7 7 7			
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Thomas F. Maxwell III  [Electronically Filed] Date 0	2 02 2016			
Signature				

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	JEITI EXI EIT	DITORES	PAGE 3 OF 4 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼	
Freedom Partners Action Fund, Ir	ıc.		C C00564765	
Check if 24-hour report X 48-hour repor	t New re	eport Amends repo	rt filed on	
Full Name of Payee FREEDOM PARTNERS CHAM	IBER OF COM	MMERCE, INC.	Date of Public Distribution/Dissemination	
Mailing Address 2200 WILSON BLVD.			02 02 2016  Amount	
STE. 102-533				
City	State	Zip Code	1000.00	
ARLINGTON	VA	22201	Transaction ID : SE24.449  Date of Disbursement or Obligation	
Purpose of Expenditure DIRECT MAIL EXPENSE		Category/ Type	01 / 29 / Y Y Y Y Y Y Y	
Name of Federal Candidate		Support	Office Sought: House District:	
HILLARY RODHAM CLINTON		X Oppose	President Senate State:	
Calendar Year-To-Date Per Election for Office Sought		36332.18	Disbursement For: ☐ Primary ☐ General 2016 ☐ Other (specify) ▶	
Full Name of Payee			Date of Public Distribution/Dissemination	
NOVA LABEL CO., INC.			02 02 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 4819 LYDELL ROAD			Amount	
City	State	Zip Code	935.94	
CHEVERLY	MD	20781	Transaction ID : SE24.439  Date of Disbursement or Obligation	
Purpose of Expenditure DIRECT MAIL EXPENSE		Category/ Type	01 26 2016	
Name of Federal Candidate		Support	Office Sought: House District:	
HILLARY RODHAM CLINTON		X Oppose	President Senate State:	
Calendar Year-To-Date Per Election for Office Sought	7	36332.18	Disbursement For: ☐ Primary ☐ General 2016 ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Exper	nditures		1935.94	
(b) SUBTOTAL of Unitemized Independent Ex	penditures		•	
(c) TOTAL Independent Expenditures			·	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Thomas F. Maxwell III Signature	[Electro	onically Filed] Date	02	

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 4 OF 4 FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼			
Freedom Partners Action Fund, Inc.	C C00564765			
Check if 24-hour report X 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y			
	ate of Public Distribution/Dissemination			
PREFERRED COMMUNICATIONS	02			
	mount			
STE. 209	7075 00			
City State Zip Code  ALEXANDRIA VA 22314 Tr	7075.00 ransaction ID : SE24.446			
Da	ate of Disbursement or Obligation			
Purpose of Expenditure DIRECT MAIL EXPENSE  Category/ Type	01 / 28 / 2016			
Name of Federal Candidate Support Office Sc	ought: House District:			
HILLARY RODHAM CLINTON Oppose Pre	esident Senate State:			
Calendar Year-To-Date Per Election for Office Sought  Disburses 2016	ment For:			
Full Name of Payee D.	ate of Public Distribution/Dissemination			
	M M M / D D / Y Y Y Y Y			
Mailing Address	mount			
City State Zip Code				
	ate of Disbursement or Obligation			
Purpose of Expenditure  Category/ Type	M = M / D = D / Y = Y = Y = Y			
Name of Federal Candidate Support Office Sc	ought: House District:			
Oppose Pre	esident Senate State:			
Calendar Year-To-Date Per Election for Office Sought	ment For: Primary General			
Per Liection for Office Sought	Other (specify) ▶			
(a) SUBTOTAL of Itemized Independent Expenditures	7075.00			
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures	36332.18			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Thomas F. Maxwell III  [Electronically Filed] Date 02	02 / 2016			
o.g. island				